

## Frequently Asked Questions – Medicaid Assessment for Ground Ambulance Transports

### What is an EMS ground ambulance provider assessment?

An EMS provider assessment was created by the 2015 Utah Legislature (S.B. 172) to supply State matching funds for enhanced Medicaid reimbursements. Ground ambulance patient transports have been increased from a base rate of \$142.72 to \$795.00 (as of July 1, 2019) for a net increase of \$652.28.

The assessment is federally required to be broad based, uniformly imposed, and must have a no hold harmless provision. This means it is required to be applied to all EMS ground ambulance providers in a standardized and consistent manner. It also may not be structured to ensure all assessed providers do not lose money on the assessment.

### How is the assessment calculated?

Division shall apply quarterly changes to an “Assessment Rate” based on data submitted from the previous calendar year. The rate is calculated with the following formula for all licensed EMS ground ambulance providers:

The assessment rate (amount for each qualified transport) is the state fund amount required for the match divided by the total number of qualified ground ambulance transports for the entire state. The numerator is calculated based on claims paid in a fiscal quarter and also includes a \$5,000 quarterly administrative fee for the entire program statewide. The denominator is total emergency ground transports from the previous year calendar year (18 months prior to the end of the fiscal year).

The assessment amount (amount you will be invoiced) is the rate (as described above) multiplied by the number of the provider’s emergency ground transports in the applicable calendar year.

The non-federal portion is the amount required by the State for the matching funds.

The patient transport numbers are based on those coded as data element is **E20\_10** with a value of **4850 "Treated, Transported by EMS"** on your patient care reports submitted to the Utah BEMSP.

For example (all numbers are for illustrative purposes only):

Total Ground Transports for Prior Calendar Year: 100,000

Ground Transports for Provider A: 50,000

Ground Transports for Provider B: 25,000

Ground Transports for Provider C: 10,000

Ground Transports for Provider D: 10,000

Ground Transports for Provider E: 5,000

Prior Quarter Enhanced Rate Net Increase: \$5,000,000

FMAP Rate: 70% State Share Rate: 30%

State Fund Amount for Quarter: \$1,500,000 (5,000,000 X 0.30)

Quarterly Administrative Fee: \$5,000

Total Amount to Fund: \$1,505,000 (1,500,000 + 5,000)

Assessment Rate: \$15.05 (1,505,000 / 100,000)

Ground Transports for Provider A: 50,000 X 15.05 = \$752,500.00

Ground Transports for Provider B: 25,000 X 15.05 = \$376,250.00

Ground Transports for Provider C: 10,000 X 15.05 = \$150,500.00

Ground Transports for Provider D: 10,000 X 15.05 = \$150,500.00

Ground Transports for Provider E: 5,000 X 15.05 = \$75,250.00

**Total \$1,505,000.00**

## What can we expect in upcoming assessment amounts?

Due to an average lag time of ~71 days for processing claims. Please budget accordingly.

## When should we expect the invoice?

The invoice is calculated after the calendar quarter is complete. The invoice is then created and emailed to the provider's contact. Under normal conditions, the invoice will be sent during the first 2 weeks after the calendar quarter. The due date for the invoice is 15 business days after the invoice date.

## Where do I send the payment?

Make checks payable to: UTAH DEPT OF HEALTH

Please write the Invoice Number on front of check or money order.

Send payment to:

Department of Health

Health Care Financing

PO Box 143104

Salt Lake City, UT 84114-3104

Questions about your Medicaid identification number, your Provider's contact person, payments, or reimbursements may be directed to Justin West Jones at [jlwest@utah.gov](mailto:jlwest@utah.gov) or by phone at 801-538-6149.

**Who can we contact for specific questions about the assessment (Medicaid)?**

Questions about the assessment may be directed to Justin West Jones at [jlwest@utah.gov](mailto:jlwest@utah.gov) or by phone at 801-538-6149.

**Who can we contact for specific questions about billable patient transport data or any general process questions (EMS)?**

Questions about the billable patient numbers or general process questions any may be directed to Dean Penovich at [dpenovich@utah.gov](mailto:dpenovich@utah.gov) by phone at 801-913-2621.